



The Asphalt Institute

National Binder Technician Certification

P R O G R A M

Host Site Application Form

Date: _____

Name: _____

Title: _____

Organization: _____

Address: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Mobile: _____

E-mail: _____

Website: _____

1. Please list how many you have of each piece of laboratory equipment listed.

BBR ____ DSR ____ DTT ____

2. What is the maximum capacity of your conference facilities?

3. How many candidates do you anticipate sending to this course? _____